

## PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

05/04/2004

Calfee Halter & Griswold  
 Suite 1400  
 800 Superior Avenue  
 Cleveland, OH 44114-2688

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## Certificate of Mailing or Transmission

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Debra L. Hale	(Depositor's name)
<i>Debra L. Hale</i>	(Signature)
August 3, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/069,671	02/22/2002	Nathan D Ames	22188/06465	3624

TITLE OF INVENTION: APPARATUS AND METHOD FOR WELDING DUPLEX STAINLESS STEEL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	08/04/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
ELVE, MARIA ALEXANDRA	1725	219-1370WM

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Calfee, Halter  
 & Griswold, LLP  
 2  
 3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Swagelok Company

Solon, Ohio U.S.A.

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 10

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-0172 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

8/3/2004

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01 FC:1501

02 FC:8001

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